



## **HeroBox How To: Support your Unit**

1. Prep your boxes by triple taping the bottom along the main seam.
2. Print stickers, cut on dotted line and tape to HeroBox. 2 (or more) per box, see page 2
3. Pack your box full to prevent shifting, triple tape the top of box along the main seam. It is also recommended to tape all of the seams to prevent sand from seeping in.
4. Fill out the Priority Address Label and Customs Form (see page 2). Place address label on top of the box inside the brackets. Take customs form with you to Post Office.
5. Pay for postage when you drop off at the Post Office. Paying online may be slightly cheaper but you need an online account and the weight of your box.

### **Do not send:**

Glass or aerosol, expired foods, hotel samples, alcohol, tobacco, lighters, matches, anything flammable or inappropriate.

### **Item Suggestions:**

You DO NOT have to send everything they request. Just send what you can. If they have not requested enough to fill a HeroBox, visit our site for a list of the most commonly requested items to include in your HeroBox: <http://www.herobox.org/items.asp>

### **Cost:**

You should expect to pay about \$25-\$40/HeroBox (Postage \$10+, Items \$15-\$30). You are welcome to spend more, this is just the standard.

### **Hero Feedback:**

Read what this program means to deployed service members. You will make an impact. <http://www.herobox.org/feedback.asp>

### **Materials Required:** ([All items are free from your local Post Office or USPS online](#))

1. Boxes: Priority Flat Rate Box
2. Priority Address Labels
3. Customs Forms (2976-A): See page 2. Post Office will weigh box
4. Postage: Pay when you drop off at your local Post Office (or online).

**Please use** the United States Post Office to ship your HeroBox(es): <http://www.usps.com>

# HEROBOX.ORG



United States Postal Service®  
**Customs Declaration and Dispatch Note — CP 72**

**IMPORTANT:** This item may be opened officially. Please print in English, using blue or black ink, and press firmly; you are making multiple copies. See Privacy Notice and Indemnity Coverage on Customer Copy.

CP 679536457US

<p><b>FROM:</b> Sender's Last Name <b>YOUR LAST NAME</b></p> <p>Business <b>HEROBOX</b></p> <p>Address (Number, street, suite, apt., P.O. Box, etc. Residents of Puerto Rico include Urbanization Code preceded with URB) <b>YOUR ADDRESS</b></p> <p>City _____ State _____ ZIP+4® _____</p> <p><b>TO:</b> Addressee's Last Name <b>HERO LAST NAME</b></p> <p>Business _____</p> <p>Address (Number, street, suite, apt., P.O. Box, etc.) <b>HERO ADDRESS</b></p> <p>Postcode _____ City _____ <b>APO or FPO</b></p> <p>State/Province _____ Country _____ <b>AE or AA or AP</b></p> <p>1. Detailed Description of Contents (enter one item per line)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><b>SNACK</b></td> <td style="width: 5%;">Qty. <b>1</b></td> <td style="width: 5%;">Lbs.</td> <td style="width: 5%;">Oz.</td> <td style="width: 25%;">4. Value (U.S. \$)</td> </tr> </table> <p>5. Check One:  <input checked="" type="checkbox"/> Gift  <input type="checkbox"/> Documents  <input type="checkbox"/> Merchandise  <input type="checkbox"/> Returned Goods  <input type="checkbox"/> Commercial Sample  <input type="checkbox"/> Other: _____</p> <p>6. Check One  <input checked="" type="checkbox"/> Airmail  <input type="checkbox"/> Surface</p> <p>7. Other Restrictions: (pertains to No. 72)  <input type="checkbox"/> Quarantine  <input type="checkbox"/> Sanitary or Phytosanitary Inspection</p> <p>8. Total Gross Wt: (all items Lbs. &amp; Ozs.) _____</p> <p>9. Total Value US \$ (all items) <b>30.00</b></p> <p>10. If non-deliverable:  <input type="checkbox"/> Treat as Abandoned  <input type="checkbox"/> Return to Sender (see inst)  <input checked="" type="checkbox"/> Redirect to Address Below:</p> <p>11. EEL/PFC _____</p> <p>12. Restrictions _____</p> <p>13. I certify the particulars given in this customs declaration are correct. This item does not contain any dangerous article, or articles prohibited by legislation or by postal or customs regulations. I have met all applicable export filing requirements under the Foreign Trade Regulations. <i>Sender's Signature and Date</i></p> <p style="text-align: center;"><b>SIGN _____ DATE _____</b></p>	<b>SNACK</b>	Qty. <b>1</b>	Lbs.	Oz.	4. Value (U.S. \$)	<p>Insured Amount (US \$) _____ SDR Value _____</p> <p>Insurance Fees (US \$) _____ Total Postage Fees (US \$) _____</p> <p>14. Sender's Customs Reference (If any) _____</p> <p>15. Importer's Reference - Optional (If any) _____</p> <p>16. Importer's Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> (select one) _____</p> <p>17. License No. _____</p> <p>18. Certificate No. _____</p> <p>19. Invoice No. _____</p> <p>20. HS Tariff Number _____ 21. Country of Origin of Goods _____</p> <p>Mailing Office Date Stamp _____</p> <p style="text-align: center; font-size: 24pt;"><b>UNIT CMDR</b></p>
<b>SNACK</b>	Qty. <b>1</b>	Lbs.	Oz.	4. Value (U.S. \$)		

PS Form 2976-A, May 2009 PSN: 7530-01-000-9834 Do not duplicate this form without USPS® approval. 1 - Manifesting/Scan Copy



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Custom Support For Our Heroes